

DATE 05 - 31 - 2023
MM DD YYYY

- PLACE AN "X" MARK ON THE FOLLOWING BOXES:
- INFORMATION YOU WISH TO UPDATE. OTHERWISE, EXISTING INFORMATION WILL NOT BE CHANGED.
- UNDER CUSTOMER'S UNDERTAKING PORTION TO SIGNIFY CONSENT.
- PLEASE INFORM THE BANK FOR ANY CHANGES IMMEDIATELY.

Full Name

Last Name APELO

First Name RENE

Middle Name ALBA

Date of Birth 11 - 01 - 1965
MM DD YYYY

For Bank Use Only

Customer ID No. _____

☐ Present Address ☒ Permanent Address

Number/ Street 140 MIRROR COURT

Barangay/ Subdivision _____

City/ Municipality PATTERSON

Province/ State CALIFORNIA

Country USA

Zip Code 95363 Years of Residence 12

Contact Information

Telephone Number 01-408-5649926
Country Code Area Code

Mobile Number 01-408-5649926
Country Code Network Code

E-Mail reneapelo@aol.com

Other Social Media Account (e.g. Facebook, Twitter etc.) _____

Branch Name

HERTZ ARCADE, ALABANG-ZAPOTE RD., LAS PINAS CITY

Customer's Undertaking

☒ I certify and affirm that the information given above and in related documents is true, accurate and complete. For this purpose, I authorize PNB to verify the truthfulness, accuracy and completeness of said information and agree to promptly inform PNB in case of any change/s in said information.

I acknowledge to have read, understood, agreed and received the Terms and Conditions Governing the Opening and Maintenance of Accounts, including those on Data Privacy which can be accessed in PNB's website www.pnb.com.ph as well as other terms and conditions governing deposit products, services and/or facilities that I availed or will avail in the future; and

I acknowledge that the terms and conditions referred to above may be amended from time to time.

I acknowledge that in considering my request, PNB may rely on the information and documents submitted, as well as on existing records on file. I understand that PNB, in its absolute discretion, may reject my request without giving any reason therefore.

For Bank Use Only

CWS / DJ Verification: eKYC Conducted By:

☐ no match

☐ with match

Signature Over Printed Name / Date

Maintenance Processed By:

Signature Over Printed Name / Date

Maintenance Approved By:

Signature Over Printed Name / Date

IMPORTANT: Please email the accomplished Online Customer Update Form to your maintaining branch together with one (1) photo-bearing government ID and three (3) specimen signatures.

California ^{USA} DRIVER LICENSE



DL **D2876568**

EXP **11/01/2023**

LN **APELO**

FN **RENE ALBA**

140 MIRROR CT
PATTERSON, CA 95363

DOB **11/01/1965**

RSTR CORR LENS

CLASS C

END NONE



11011965

SEX M

HAIR BLK

EYES BRN

HGT 5'-07"

WGT 140 lb

ISS

DD 10/09/2018645P5/AAFD/23

10/09/2018